



Creative Kids Craft Club

CHILDREN AGES 3-5

Come join and socialize with other kids your age as we create different seasonal, holiday, and general arts and crafts projects each date. Parents are encouraged to participate with their child. Some classes will have multiple crafts depending on the complexity of the project. This program is supported by the Marion Arts Council. *Limit 15 participants.*

Fee: \$10 per child, per class

Days/Dates: Wed-1/23, Tues-2/12, Thur-3/14, Wed-4/17, Wed-5/8, Thur-9/19, Thur-10/17, Wed-11/13

Location: Lowe Park

Time(s): AM Classes: 10-11 a.m.
PM Classes: 6-7 p.m.

Notes: These are parent-child classes. A new recipe is introduced each month.

REGISTRATION DEADLINE: 1 Week Prior To Class Date

Sign up early, we can't guarantee there will be openings after the deadline.

A LATE FEE OF \$10.00 WILL BE ADDED FOR EACH REGISTRATION AFTER THE DEADLINE.

PLEASE PRINT CLEARLY AND COMPLETE ALL FIELDS

Participant's Name: _____ Gender (Circle One): Boy or Girl

D.O.B.: _____ Age: _____ Grade (2018-19) _____

Circle Date(s) AND Time(s):	January 23 <i>Wednesday</i>	AM CLASS <i>10-11 a.m.</i>	PM CLASS <i>6-7 p.m.</i>
	February 12 <i>Tuesday</i>	AM CLASS <i>10-11 a.m.</i>	PM CLASS <i>6-7 p.m.</i>
	March 14 <i>Thursday</i>	AM CLASS <i>10-11 a.m.</i>	PM CLASS <i>6-7 p.m.</i>
	April 17 <i>Wednesday</i>	AM CLASS <i>10-11 a.m.</i>	PM CLASS <i>6-7 p.m.</i>
	May 8 <i>Wednesday</i>	AM CLASS <i>10-11 a.m.</i>	PM CLASS <i>6-7 p.m.</i>
	September 19 <i>Thursday</i>	AM CLASS <i>10-11 a.m.</i>	PM CLASS <i>6-7 p.m.</i>
	October 17 <i>Thursday</i>	AM CLASS <i>10-11 a.m.</i>	PM CLASS <i>6-7 p.m.</i>
	November 13 <i>Wednesday</i>	AM CLASS <i>10-11 a.m.</i>	PM CLASS <i>6-7 p.m.</i>

Parent's Name(s): _____ E-mail: _____

Address: _____ Phone: _____

Parent's Signature: _____ Date: _____

Signature of Parent/Guardian: I hereby authorize my child to register to participate in any of the stated programs above sponsored by the City of Marion Parks and Recreation Department. I understand that these programs, like most programs similar in nature, have some degree of inherent risk involved. Furthermore, my child is in good physical condition appropriate to participation in the above activities and I understand that the participants must assume full responsibility for bodily injury incurred while participating in the activities. No accident insurance is provided through the City of Marion. I grant the Marion Parks and Recreation Department permission to use photos and/or videos taken of my child during participation in these programs. I waive my right to inspection or compensation.

RETURN FORM & PAYMENT TO:

Marion Parks and Recreation, 4500 Tenth Street, Marion, IA 52302

For questions or more information please contact Marion Parks & Recreation at 319-447-3590